

THOMAS L. GARTHWAITE, M.D. Director and Chief Medical Officer

FRED LEAF Chief Operating Officer

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES 313 N. Figueroa, Los Angeles, CA 90012 (213) 240-8101

August 26, 2004

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES NOTICE OF COOPERATIVE AGREEMENT FOR FISCAL YEAR 2004-05

(All Districts) (4 Votes)

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Approve and instruct the Director of Health Services, or his designee, to accept Notice of Cooperative Agreement (NCA) No. U50/CCU923797-01 (Exhibit I) from the Federal Centers for Disease Control and Prevention (CDC) in the amount of \$1,040,674 for Fiscal Year (FY) 2004-05 to support the Department of Health Services' (DHS or Department) Epidemiology and Laboratory Capacity for Infectious Diseases program services.
- 2. Authorize and delegate authority to the Director of Health Services or his designee, to accept amendments to the NCA No. U50/CCU923797-01 from the CDC for FY 2004-05, not to exceed 25% of the base award, subject to review and approval by County Counsel and notification of Board offices.
- 3. Approve a related appropriation adjustment in the amount of \$360,000 for FY 2004-05 projected expenditures.

Gloria Molina

First District

Yvonne Brathwaite Burke Second District

> Zev Yaroslavsky Third District

Don Knabe Fourth District

Michael D. Antonovich Fifth District The Honorable Board of Supervisors August 26, 2004 Page 2

PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTIONS:

In approving these actions, the Board is authorizing the acceptance of grant funds from the CDC, delegating authority to the Director of Health Services, or his designee, to sign amendments to the NCA and requesting an appropriation adjustment for FY 2004-05 for the continued provision of Epidemiology and Laboratory Capacity for Infectious Diseases program services.

FISCAL IMPACT/FINANCING:

The total program cost for FY 2004-05 is \$1,691,814, which is offset by CDC funds in the amount of \$1,040,674, with a net in-kind County cost of \$651,140 (Exhibit II). An appropriation adjustment in the amount of \$360,000 is being requested to reflect funds that are not currently in the FY 2004-05 Adopted Budget.

Funding will be included in subsequent fiscal years as needed.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

For a number of years the Department has received funding from the federal CDC to support projects for Epidemiology and Laboratory Capacity for Infectious Diseases program services.

On February 6, 2004 the Department submitted an application in response to Federal Program Announcement Number 04040 entitled "Epidemiology and Laboratory Capacity for Infectious Diseases" for Los Angeles County.

On June 24, 2004 the Department received notification of NCA No. U50/CCU923797-01 for FY 2004-05. The NCA will support funding for the study of five epidemiology projects as follows: Antibiotic Resistance Prevention, Food Safety Through Surveillance of Foodborne Illness, National Electronic Disease Surveillance System Component, West Nile Virus Surveillance and Epidemiology and General Epidemiology and Laboratory Capacity.

County Counsel has reviewed and approved (Exhibit I) as to form.

Attachments A and B provide additional information. Attachment B is the Grants Management Statement for grant awards exceeding \$100,000.

CONTRACTING PROCESS:

Not applicable to this action.

The Honorable Board of Supervisors August 26, 2004 Page 3

IMPACT ON CURRENT SERVICES (OR PROJECTS):

Epidemiology and Laboratory Capacity for Infectious Diseases program services will continue without interruption.

When approved, this Department requires three copies of the Board's action.

Respectfully submitted,

Thomas L. Garthwaite, M.D.

Director and Chief Medical Officer

TLG:kh

Attachments (2)

c: Chief Administrative Officer County Counsel Executive Officer, Board of Supervisors Auditor-Controller

BLETCD2367.KH

SUMMARY OF NOTICE OF COOPERATIVE AGREEMENT

Type of Service:

Program funds supports the study of five epidemiology for infectious disease projects as follows: Antibiotic Resistance Prevention, Food Safety Through Surveillance of Foodborne Illness, National Electronic Disease Surveillance System Component, West Nile Virus Surveillance and Epidemiology and General Epidemiology and Laboratory Capacity.

Agency Addresses, Contact Persons, and Telephone Numbers:

Department of Health & Human Services - Public Health Service Federal Centers for Disease Control and Prevention (CDC) 2920 Brandywine Road, Suite 3000 Atlanta, Georgia 30341-4146

Attention:

Jeffrey L. Napier, Grants Management Officer

Acquisition and Assistance, Branch B, Team V

Procurement and Grants Office

Telephone: (770) 488-2787 FAX: (770) 488-2998

3. Term:

The project period is effective July 1, 2004 through June 30, 2009. The budget period for the NCA is effective July 1, 2004 through June 30, 2005.

Financial Information:

The total program cost for FY 2004-05 is \$1,691,814, which is offset by CDC funds in the amount of \$1,040,674, with a net in-kind County cost of \$651,140 (Exhibit II). An appropriation adjustment in the amount of \$360,000 is being requested to reflect funds that are not currently in the FY 2004-05 Adopted Budget.

Funding will be included in subsequent fiscal years as needed.

Geographic Area To Be Served:

Countywide.

Accountable for Monitoring and Evaluation:

Laurene Mascola, M.D., M.P.H., Chief, Acute Communicable Disease Control Program.

Approvals:

Public Health: John F. Schunhoff, Ph.D., Chief of Operations

Contract Administration: Irene Riley, Director

County Counsel (approval as to form): Kelly Auerbach Hassel, Deputy County Counsel

Los Angeles County Chief Administrative Office Grant Management Statement for Grants Exceeding \$100,000

Department: Health Services - Acute Communicable Disease Control Program

Grant Project Title	and Description					
Grant Project Title and Description EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES - NOTICE OF COOPERATIVE AGREEMENT FROM THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) Funding Agency Program (Fed. Grant #/State Bill or Code #) Grant Acceptance Deadline			Market State Control			
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rederal CDC	D LABORATORY CAPACITY FOR INFECTIOUS DISEASES - NOTICE OF COOPERATIVE THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) Program (Fed. Grant #/State Bill or Code #) Notice of Cooperative Agreement No. U50/CCU 923797-01 As Soon As Possible Funding: \$1,040,674 County Match Requirements 004-09 Begin Date: (Budget Period) July 1, End Date: June 30, 2005 ired Under this Grant: 10 Full Time 9 Part Time 1 Obligations Imposed on the County When the Grant Expires for this program be informed this is a grant funded program? Yes √ No for this program be placed on temporary ("N") items? Yes √ No to continue this program after the grant expires Yes No √ gated to continue this program after the grant expires, the Department will: a cost without reducing other services Yes No as appropriate, positions/program costs funded by this grant. Yes √ No sonnel on existing space: Not applicable.					
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EXHIBIT Public Health S

> Centers for Disease Control and Prevention (CDC) Atlanta GA 30341-3724

> > JUN 16 2004

DISEASE CONTROL

ACUTE COMMUNICABLE

Laurene Mascola, M.D., M.P.H. Chief, Acute Communicable Disease Control County of Los Angeles Department of Health 313 N. Figueroa Street, Room 212 Los Angeles, California 90012

Reference: Notice of Cooperative Agreement Number U50/CCU923797-0

Epidemiology and Laboratory Capacity for Infectious Diseases

Dear Dr. Mascola:

Enclosed is the Notice of Grant Award for Year 01 of the program entitled "Epidemiology and Laboratory Capacity for Infectious Diseases" under Program Announcement Number 04040. This Notice of Award provides the total funding approved for the budget period which begins July 1, 2004 and ends June 30, 2005. Please refer to the continuation pages of the Award Notice for specific details of funds awarded by budget category and other pertinent information regarding the award.

The Project Officer listed on the enclosed Contact List will be responsible for the review and programmatic monitoring of your assistance award. The Grants Management Specialist listed has been assigned the business management responsi illities of your award.

An annual Financial Status Report (FSR) must be submitted within 90 days after the end of the budget period. This report must be submitted on the enclosed form, Standard Form No. 269, and include only those funds authorized and expended during the budget period. An original and two copies of the semiannual progress report, along with all correspondence, including requests for prior approvals, must be submitted to the Grants Management Officer, Attention: Grants Management Specialist, with a copy to the project officer. All correspondence must include your award number and signatures from both the business office and the program official.

If you have any questions on this matter, please feel free to contact Yolanda Ingram-Sledge, Grants Management Specialist (770) 488-2787.

Sincerely.

Jeffrey L. Napier

Grants Management Officer

Acquisition and Assistance, Branch B, Team V

Procurement and Grants Office

cc: Business Office

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SPONSOR: NATIONAL CENTER FOR INFECTIOUS DISEASES *IDC RATE BASE: SEE ATTACHED

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PHS-5152-1 (CONTINUED)

DATE ISSUED....: 06/16/2004

GRANT NO....: U50/CCU923797-01

APPROVAL LIST NO: C0-072-B04

FY CAN	DOCUMENT NO.	ADM.CODE	FIN.ASST	DIR.ASST
04-11716 04-9211388	CCU923797	CCU50	250,000	0
04-1194B 04-9213773	CCU923797	CCU50	251,653	0
04-11716 04-921030M	CCU923797	CCU50	96,264	0

DIRECT ASSISTANCE BUDGET:

PERSONAL SERVICE:	n
TRAVEL:	0
VACCINE	0
	0
OTHER SERVICE:	0

NOTICE OF AWARD

(Continuation Sheet)

PAGE 2 OF 4

DATE ISSUED

JUN 16 2004

GRANT NO. U50/CCU923797-01

GRANTEE: LOS ANGELES COUNTY DEPT OF HEALTH

SERVICES

TERMS AND CONDITIONS OF THIS AWARD

INCORPORATION:

Program Announcement Number 04040 entitled "Epidemiology and Laboratory Capacity for Infectious Diseases" and the application dated February 6, 2004, are made a part of this award by reference.

INDIRECT COST:

The County calculates indirect cost on total salaries of County personnel at the rate of 29.29%.

HUMAN SUBJECTS:

Should any of the employees whose salaries are funded by this award engage in human subjects research as defined by Title 45 Code of Regulations part 46, the institution must be covered by or apply for an assurance from the Office

APPROVED BUDGET:

Budget Category		AR		FOOD	NARMS	NEDSS		WNV						
Personnel	\$	56,436	\$	161,832	\$ -		•		CORE	T	otal Funds			
Fringe	\$	20,148	\$	57,773	<u>. 4</u>		\$	the second secon	\$ 84,494	\$	521,371			
Consultants	\$		\$			49,386		23,602	22,901	\$	173,810			
Travel	\$	3,150	\$	4,100				-	-					
Equipment	\$	/	\$	4,100	4,000		3,950	8,500	\$	23,700				
Supplies	\$		\$	15,000				-	.	\$				
Other	\$ \$ \$ \$	\$	\$	\$		\$	15,000	-	1,500		65,240	5,000	\$	86,740
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Total Direct Costs Indirect Costs	\$	79,734 16,530	\$	242,205 47,406	\$ 7,500 	\$ 207,382 44,271	\$	230,634 S 19,366	120,895 24,751	\$	888,350			
Total Award	\$	96,264	\$	289,611	\$ 7,500	\$ 251,653	\$	250,000		<u></u>	152,324 1,040,674			

TECHNICAL REPORTING REQUIREMENTS:

An original and two copies of a narrative semi-annual progress report is required. Progress reports should address the status of progress toward specific project objectives and should include copies of any publication resulting from

An ANNUAL financial status report (FSR) is required no later than 90 days after the end of the budget period. The original and two copies of all reports and official correspondence MUST BE IDENTIFIED WITH THE AWARD NUMBER SHOWN AT THE TOP RIGHT OF THIS DOCUMENT AND must be submitted to the CDC Grants office at the following address:

Grants Management Branch Attn: Yolanda Ingram-Sledge

NOTICE OF AWARD

(Continuation Sheet)

PAGE 3 OF 4

DATE ISSUED

JUN 16 2004

GRANT NO. U50/CCU923797-01

GRANTEE: LOS ANGELES COUNTY DEPT OF HEALTH SERVICES

Centers for Disease Control and Prevention (CDC) 2920 Brandywine Road, Suite 3000 Atlanta, Georgia 30341-4146 Telephone: (770) 488-2787; FAX: (770) 488-2777

CORRESPONDENCE/REPORTS:

All correspondence regarding this award must be identified with the award number as shown at the top right of this page.

PRIOR APPROVAL:

In accordance with the PHS Grants Policy Statement dated April 1, 1994, Post award Administration, Chapter 8-8, "ALL requests which require prior approval must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director." Any requests received which reflects only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include a new proposed budget and narrative justification of the requested changes.

The deadline date for submitting requests for carryover of unobligated funds and rebudgeting of funds for this budget period is February 1, 2005. Any of the aforementioned requests received after this date will be denied and returned to the grantee. FAXED OR E-MAILED REQUESTS WILL NOT BE ACCEPTED.

INVENTIONS:

Acceptance of grant funds obligates recipients to comply with the "standard patent rights" clauses in 37 CFR 401.14.

PUBLICATION:

Publications, journal articles, etc., produced under a CDC grant/cooperative agreement project must bear an acknowledgment and disclaimer, as appropriate, such as: This publication (journal article, etc.) was supported by Grant/Cooperative Agreement Number ____ from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

EQUIPMENT AND PRODUCTS:

To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made.

ACKNOWLEDGING FEDERAL SUPPORT:

When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

INSPECTOR GENERAL:

For your information, United States Department of Health and Human Services' Inspector General maintains a toll-

NOTICE OF AWARD

(Continuation Sheet)

PAGE 4 OF 4

DATE ISSUED

JUN 16 2004

GRANT NO. U50/CCU923797-01

GRANTEE: LOS ANGELES COUNTY DEPT OF HEALTH SERVICES

free telephone number, (800) 368-5779, for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Such reports are kept confidential, and callers may decline to give their names if they choose to remain anonymous.

PAYMENT INFORMATION:

Payments under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS is administered by the Division of Payment Management, Program Support Center, HHS. PMS will forward the DHHS Manual for Recipients Financed Under the Payment Management System (PMS), PMS-270 and PMS-272 forms.

A. PMS correspondence, mailed through the U.S. Postal Service, should be addressed follows: Division of Payment Management, FMS/PSC/HHS, P.O. Box 6021 Rockville, MD 20852.

B. If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, Rockwell Building #1, Suite 700, 11400 Rockville Pike, Rockville, MD 20852.

To expedite your first payment from this award, attach a copy of the Notice of Grant/ Cooperative Agreement to your payment request form.

CDC CONTACT NAMES:

Business and Grants Policy Contact
Yolanda Ingram-Sledge, Grants Management Specialist
PGO/GMB, CDC
2920 Brandywine Road, Room 3000
Atlanta, Georgia 30341-4146
Telephone: (770) 488-2787, Internet: yis0@cdc.gov

Programmatic Contact

Deborah Deppe Centers for Disease Control and Prevention (CDC) National Center for Infectious Diseases (NCID) 1600 Clifton Road, NE, Mailstop C-12 Atlanta, Georgia 30333 Telephone: (404) 639-4668 E-mail Address: dad1@cdc.gov

Program Announcement #04040 Cooperative Agreement for Epidemiology and Laboratory Capacity (ELC) for Infectious Diseases

SUMMARY STATEMENT **Privileged Communication**

Date Reviewed:

4/21/2004

Recommendation: Approve

Application Number: PA 04040-34

Grant #: U50/CCU923797

Principal Investigator/Program Director: Laurene Mascola, MD, MPH

Organization: County of Los Angeles Department of Health Services

City, State: Los Angeles, CA

Project Year: One

Amount Requested: \$1,355,288

DESCRIPTION:

The succinct 23 page proposal and accompanying 12 attachment documents provided by the County of Los Angeles Department of Health Services is a Competing Continuation ELC proposal prepared by the Acute Communicable Disease Control and Public Health Laboratory who will carry it out. The proposal contains a General Background Section which describes the community served by the applicant, its organizational structure, the eighty diseases and conditions that are reportable by California State law to the Department of Health and Human Services (DHS), and the centralized reporting unit called Visual Confidential Morbidity Report (VCMR) it uses to report these diseases. The VCMR incorporates a 24/7 system for receiving and evaluating urgent disease reports and requests, including those potentially due to bioterrorism. LA County DHS also has promoted use of electronic laboratory reporting via interfaces with Southern California Kaiser Regional laboratories, its Public Health Laboratory, and web-based reporting by infection control practitioners and physicians within the jurisdictions.

The Program Narrative contains five of the seven possible activities supported by the announcement of the ELC cooperative agreement, lacking only descriptions of programs for surveillance of influenza and hepatitis. Each of the five program component descriptions consists of (A) a background Overview description, (B) an Objectives section, and (C) a Methods/Activities/Work Plan section.

The first and longest program component description is Prevention of Antimicrobial Resistance. The Overview Section of ARM requests new funding for a Public Health Nurse to improve surveillance for antibiotic resistance in LA County. Current surveillance emphasizes nosocomial (MRSA) and community associated methicillin-resistant Staphylococcus aureus (CAMSRA) and invasive pneumococcal disease (IPD) but efforts to identify fluoroquinoline resistance in

Escherichia coli and vancomycin-resistant Staphylococcus aureus. The nurse would assist in collecting community-specific and case-specific data. Other activities are efforts to improve standardization and reporting of hospital antibiogram data, and increased laboratory electronic reporting of resistance data. Considerable resources have been devoted to educational information on antibiotic resistance to both health professionals and adults. Continuation of funding for a senior health educator and its expansion by hiring a bilingual (Spanish speaking) health educator. Objectives and work plans comprise of expansions of ongoing programs, particularly in improved screening, standardization, and electronic reporting of laboratory data in a fashion compatible with NEDSS standards and educational programs to reach as many communities as possible. This includes collection of Spanish ARM literature and translation of existing educational materials being used into Spanish.

The Foodborne Disease Surveillance and Prevention Program Description acknowledges a significant increase in viral gastroenteritis in the County and the need to expand the current existing Pulse-Net functions to include further analysis of Campylobacter and Shigella strains obtained from Los Angeles Country. Considerable staffing is supported by the ELC to participate in Pulse-Net and maintain CDC certification as a full member for Listeria, Ecoli O157:H7, Shigella sonnei and most of the Salmonella serotypes.

The second longest Program Description is on the National Electronic Disease Surveillance System (NEDSS) Component. It is based on the LA County efforts to enhance the existing Visual Confidential Morbidity Reports electronic system (VCMR) with support of bioterrorism surveillance and epidemiologic response supported by a CDC Bioterrorism Preparedness and Response Program Cooperative Grant (Focus Areas B surveillance and E Health Alert Network). This has permitted expansion of the VCMR to include sexually transmitted disease reports and intentional and non-intentional injuries. Besides VCMR, the Web-based reporting by infection control practioners ("Web-CMR" currently includes eight hospitals but is proposed for expansion to the 100 hospitals in the county and additional community physicians. Because of a lapse in ELC funding for this program, it is proposed that resources to fully integrate the system and to bring it into compliance with PHIN and NEDSS standards with ELC support for three positions in information technology support.

The fourth Program Component consists of West Nile Surveillance and Prevention. West Nile Virus was first detected in September 2003 in Los Angeles County with 2003 positive samples including six mosquito pools, 65 birds and one patient. In anticipation of increased WNV infections in 2004, increased surveillance in regions not served by mosquito abatement districts under a contract and increases in laboratory testing capacity are requested by hiring a laboratory technician and providing increased laboratory supplies. Expansion of diagnostics is requested to include PCR detection of enteroviruses and herpes simplex virus in human CSF samples submitted for arboviral testing.

The Last Program Activity encompasses General Epidemiology and Laboratory Capacity. Funded since 1995 by ELC which has general met its three original goals of upgrading the reportable disease data system, piloting laboratory-based electronic reporting of test results, and establishing molecular epidemiology capacity in the County Public Health Laboratory. This

program element is considered to largely have a supervisory role for unifying technical activities related to NEDSS/PHIL under a single director and providing necessary administrative oversight for meeting ELC budget and programmatic objectives. Funds in this component would largely be expended to ensure grant compliance while IT task support would be directed toward the NEDSS Program element.

HUMAN SUBJECTS/ANIMAL SUBJECTS:

No human or animal subjects involved.

PROJECT STAFF:

No comments noted.

SUMMARY OF STRENGTHS:

- o This proposal is focused on specific, realistic activities
- Health education is the focus of the AMR activities, which appear to be essential to improving both surveillance and appropriate use
- Much needed improvements in disease reporting functions will be addressed to move away from paper and telephone reporting to electronic methods
- o Laboratory capacity for WNV testing will be expanded
- Proposal concentrates on the base established by ELC program funding and ways in which it can be improved.
- Recognition that electronic reporting by LA County hospitals and physicians is an extremely rich source of information but data collection needs to be uniform and provided in NEDDS/PHIN compatible form. Good emphasis on moving toward that goal.
- O Description of major problems in serving current population and some current ID concerns

SUMMARY OF WEAKNESSES:

- o The relationship between the laboratory and epidemiology functions is unclear
- o Timeline management of objectives is not specified.
- o Lack of consideration of outcomes and measures of effectiveness.
- o Insufficient input regarding available DHS laboratory and epidemiology resources and integration of programs.
- O Inadequate addressing of integration of laboratory results with epidemiology enhancements. Too much emphasis on doing and not enough on health improvement measures. This could be an area where resources in Element Five are increased to ensure the data is reported rapidly, is useful, and that future planning and outcomes measures are integrated into future ELC submissions. It appears present staff is overtaxed for grant writing and needs assistance.
- o It is unclear how the projects will be overseen and outcomes measured and evaluated
- This appears to be a program that is evolving and reorganizing as it grows to be more in alignment with expanding functions. This may be a weakness in that long range planning is not evident.

OTHER RELEVANT COMMENTS:

None noted.

BUDGET:

County appears to need additional resources. Not clear why additional elements, particularly for influenza and hepatitis have not been added to provide resources that can also help with electronic data transmission integration and case follow-ups to laboratory data. Realign administrative oversight management and IT positions to Program Elements 1-4 or expand it as described above for use in program evaluation and development.

The bulk of the funding requested is for personnel. The other category is for laboratory supplies and services for foodborne and WNV testing.

RECOMMENDATION(S) TO THE NEGOTIATORS:

Increase laboratory emphasis on ARM and use of data in outbreaks/epidemiology follow-up and decrease emphasis on non-professional ARM education.

Place less emphasis on expansion PulseNet reporting beyond Campylobacter and involvement and more on viral gastroenteritis and analysis of existing. PulseNet staff need to be more efficient or selective so staff time can be used on viral gastroenteritis PCR.

Diffusion of ID goals by inclusion of non-ID reporting for electronic reporting seems likely to delay NEDDS/PHIN compatibility. Need more input from CDC NEDSS staff and develop clearer implementation strategy.

Ensure that requested personnel are justified and their functions clearly outlined. Clarify funding requested for contractual arrangement. Obtain more information on the organizational structure, specifically how the laboratory and epidemiology units fit into the structure and what mechanisms are in place to facilitate their collaboration.

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
PUBLIC HEALTH
EPIDEMIOLOGY AND LABORATORY CAPACITY IN INFECTIOUS DISEASES
BUDGET: JULY 1, 2004 THROUGH JUNE 30, 2005

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